

Fill in this information to identify your case:

United States Bankruptcy Court for the:

CENTRAL DISTRICT OF CALIFORNIA

Case number (if known) Chapter 11

Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1. Debtor's name Southern Pacific Janitorial Group, Inc.

2. All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 47-3512298

4. Debtor's address Principal place of business Mailing address, if different from principal place of business 393 Athol St, Suite 8 San Bernardino, CA 92401 San Bernardino County

5. Debtor's website (URL)

6. Type of debtor Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) Partnership (excluding LLP) Other. Specify:

Debtor

Southern Pacific Janitorial Group, Inc.

Case number (if known)

Name

7. Describe debtor's business

A. Check one:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Railroad (as defined in 11 U.S.C. § 101(44))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- Clearing Bank (as defined in 11 U.S.C. § 781(3))
- None of the above

B. Check all that apply

- Tax-exempt entity (as described in 26 U.S.C. §501)
- Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- Chapter 7
- Chapter 9
- Chapter 11. Check all that apply:
 - Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
 - The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
 - A plan is being filed with this petition.
 - Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
 - The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.
 - The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.
- Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- No.
- Yes.

If more than 2 cases, attach a separate list.

District _____	When _____	Case number _____
District _____	When _____	Case number _____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- No
- Yes.

List all cases. If more than 1, attach a separate list

Debtor _____	Relationship _____
District _____	When _____ Case number, if known _____

Debtor Southern Pacific Janitorial Group, Inc. Case number (if known) _____
 Name

11. Why is the case filed in this district? *Check all that apply:*

Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

No

Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
 What is the hazard? _____

It needs to be physically secured or protected from the weather.

It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

Other _____

Where is the property? _____
 Number, Street, City, State & ZIP Code

Is the property insured?

No

Yes. Insurance agency _____
 Contact name _____
 Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds *Check one:*

Funds will be available for distribution to unsecured creditors.

After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

<input type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5001-10,000	<input type="checkbox"/> 50,001-100,000
<input checked="" type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

15. Estimated Assets

<input type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
<input checked="" type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

16. Estimated liabilities

<input type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input checked="" type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

Debtor

Southern Pacific Janitorial Group, Inc.

Case number (if known)

Name

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **October 26, 2017**
MM / DD / YYYY

X /s/ Almirante Perez, Preseident
Signature of authorized representative of debtor

Title _____

Almirante Perez, Preseident
Printed name

18. Signature of attorney

X /s/ Michael Jay Berger
Signature of attorney for debtor

Date **October 26, 2017**
MM / DD / YYYY

Michael Jay Berger
Printed name

Law Offices of Michael Jay Berger
Firm name

**9454 Wilshire Boulevard, 6th floor
Beverly Hills, CA 90212**
Number, Street, City, State & ZIP Code

Contact phone 310-271-6223 Email address michael.berger@bankruptcypower.com

100291
Bar number and State

Fill in this information to identify the case:

Debtor name Southern Pacific Janitorial Group, Inc.

United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA

Case number (if known) _____

Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule*
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration **Corporate Resolution**
Corporate Ownership Statement

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 26, 2017

X /s/ Almirante Perez, Preident

Signature of individual signing on behalf of debtor

Almirante Perez, Preident

Printed name

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Southern Pacific Janitorial Group, Inc.

United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA

Case number (if known): _____

Check if this is an amended filing

Official Form 204
Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders 12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Alberto Lopez 1900 Poco Way, Apt. 203 San Jose, CA 95116		Non wage earner contracting employee receiving 1099				\$1,248.00
Ander Castillo 2415 Pine Ave., Apt 503 Long Beach, CA 90803		Non wage earner contracting employee receiving 1099				\$1,270.00
Armando Martinez 869 Olive Ave South San Francisco, CA 94080		Non wage earner contracting employee receiving 1099				\$1,270.00
Atlas General Ins. Services, LLC 4365 Execution Drive, Ste 400 San Diego, CA 92121		Workers Compensation Insurance Premium: 1. For Goods and Services Sold and Delivered 2. Account Stated 3. Open Bood Account 4. Breach of Contract	Contingent Unliquidated Disputed			\$304,108.00
Chase P O Box 94014 Palatine, IL 60094-4014		Business Credit Card				\$936.59
Evelia Adame 29596 Dixon St., Apt 51 Hayward, CA 94544		Non wage earner contracting employee receiving 1099				\$1,970.00
Gasper Raymundo 1405 Marshall Street Redwood City, CA 94063		Non wage earner contracting employee receiving 1099				\$3,100.00

Debtor **Southern Pacific Janitorial Group, Inc.**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Gerardo Morales 380 W Barbour, Apt. 143 Banning, CA 92220		Non wage earner contracting employee receiving 1099				\$1,400.00
Hugo Duarte 617 W 17th Street San Bernardino, CA 92405		Non wage earner contracting employee receiving 1099				\$2,100.00
Internal Revenue Service 300 N. Los Angeles Street Los Angeles, CA 90012		Proposed penalty amount for 2015 Income Tax Returns.				\$25,480.00
Javier Gonzalez 2652 Del Rosa Ave., Apt 131 San Bernardino, CA 92404		Non wage earner contracting employee receiving 1099				\$2,430.00
Jorge Huerta 393 Athol St., Ste 8 San Bernardino, CA 92401		Non wage earner contracting employee receiving 1099				\$2,010.00
Lourdes Adame 22584 Nevada Rd Hayward, CA 94541		Non wage earner contracting employee receiving 1099				\$1,430.00
Luis Arce 393 Athol St., Ste 8 San Bernardino, CA 92401		Non wage earner contracting employee receiving 1099				\$1,200.00
Luis Lozoya 485 B Street Hayward, CA 94545		Non wage earner contracting employee receiving 1099				\$1,250.00
Maria Prado 218 W Washington San Bernardino, CA 92411		Non wage earner contracting employee receiving 1099				\$1,400.00
Rancho Janitorial Supplies 416 North Ninth Street Modesto, CA 95350		Janitorial Supplies				\$12,591.78
Vernica Gonzalez 393 Athol St., Ste 8 San Bernardino, CA 92401		Non wage earner contracting employee receiving 1099				\$1,500.00
Victor Camacho 968 E. Olive Street San Bernardino, CA 92410		Non wage earner contracting employee receiving 1099				\$1,100.00

Debtor **Southern Pacific Janitorial Group, Inc.**
Name _____

Case number (if known) _____

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Walter Ruiz 3674 Water Bary Ct., Apt 9 San Jose, CA 95117		Non wage earner contracting employee receiving 1099				\$1,250.00

CORPORATE RESOLUTION OF SOUTHERN PACIFIC JANITORIAL GROUP, INC.
AUTHORIZING THE FILING OF A CHAPTER 11 BANKRUPTCY PETITION

WHEREAS, SOUTHERN PACIFIC JANITORIAL GROUP, INC. is not able to pay its debts as they come due; and

WHEREAS, SOUTHERN PACIFIC JANITORIAL GROUP, INC has authorized Almirante Perez to hire attorney Michael Jay Berger to prepare and file a Chapter 11 Bankruptcy Petition for and to have Mr. Berger prepare and sign any additional documents needed in connection with said bankruptcy filing; and

WHEREAS, The Company is unable to pay its debts as they come due, including but not limited to, the proposed class action lawsuit filed by Marcela Ramirez vs Southern Pacific Janitorial Group, Inc., DOES 1-20 inclusive, San Bernardino County Superior Court, Case No. CIVDS1715508 and the lawsuit filed by Atlas General Insurance Services LLC vs Southern Pacific Janitorial Group, Inc. and DOES 1-50 inclusive, San Bernardino County Superior Court Case No. CIVDS-1704093.

WHEREAS, Almirante Perez is the Chief Executive Officer and Chief Financial Officer of SOUTHERN PACIFIC JANITORIAL GROUP, INC.:

NOW, THEREFORE:

IT IS HEREBY RESOLVED by SOUTHERN PACIFIC JANITORIAL GROUP, INC., to file a Chapter 11 bankruptcy petition. Almirante Perez and Michael Jay Berger are specifically authorized to file said Chapter 11 petition on behalf of SOUTHERN PACIFIC JANITORIAL GROUP, INC.

Dated:

10-25-2017

SOUTHERN PACIFIC JANITORIAL GROUP, INC

By:

Almirante Perez, President

**United States Bankruptcy Court
Central District of California**

In re **Southern Pacific Janitorial Group, Inc.**

Debtor(s)

Case No.

Chapter **11**

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Almirante Perez 6060 Blythe Ave Highland, CA 92346			50%
Mirian Garci 6060 Vlythe Ave Highland, CA 92346			50%

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **October 26, 2017**

Signature **/s/ Almirante Perez, Preseident
Almirante Perez, Preseident**

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

**STATEMENT OF RELATED CASES
INFORMATION REQUIRED BY LBR 1015-2
UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA**

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed at _____, California.

/s/ Almirante Perez, Preseident

Almirante Perez, Preseident

Date: October 26, 2017

Signature of Debtor

Signature of Joint Debtor

Fill in this information to identify the case:

Debtor name Southern Pacific Janitorial Group, Inc.

United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA

Case number (if known) _____

Check if this is an amended filing

**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>84,395.00</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>84,395.00</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>0.00</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ <u>80,899.50</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ <u>317,636.37</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>398,535.87</u>

Fill in this information to identify the case:

Debtor name Southern Pacific Janitorial Group, Inc.

United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA

Case number (if known) _____

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- No. Go to Part 2.
 Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor			Current value of debtor's interest
3.	Checking, savings, money market, or financial brokerage accounts (<i>Identify all</i>)		
	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number
3.1.	<u>JP Morgan Chase Bank, N.A.</u>	<u>Business Checking Account</u>	<u>3028</u> <u>\$24,000.00</u>

4. **Other cash equivalents** (*Identify all*)

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$24,000.00

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- No. Go to Part 3.
 Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**
 Description, including name of holder of deposit

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
 Description, including name of holder of prepayment

8.1. Security deposit with Landlord \$500.00

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$500.00

Debtor Southern Pacific Janitorial Group, Inc. Case number (If known) _____
Name

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- No. Go to Part 4.
 Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 37,600.00 - 0.00 = ... \$37,600.00
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$37,600.00

Part 4: Investments

13. Does the debtor own any investments?

- No. Go to Part 5.
 Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- No. Go to Part 6.
 Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies Paper towels, buckets, brushes, trash bags, chemicals for cleaning, gloves, brushes, dusters, trash cans and other miscellaneous cleaning products		\$0.00		\$5,000.00

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$5,000.00

24. Is any of the property listed in Part 5 perishable?

- No
 Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- No
 Yes. Book value _____ Valuation method _____ Current Value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- No

Debtor Southern Pacific Janitorial Group, Inc. Case number (if known) _____
Name

Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- No. Go to Part 7.
 Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- No. Go to Part 8.
 Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software Two desks, computer, computer monitor, printer, file cabinets, couple of chairs, fax machine, copy machine	\$0.00		\$3,000.00

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.** Add lines 39 through 42. Copy the total to line 86. \$3,000.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- No
 Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- No
 Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- No. Go to Part 9.
 Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. 2010 Ford E150 Super Cab Milage 199704	\$0.00	Comparable sale	\$3,600.00

Debtor Southern Pacific Janitorial Group, Inc. Case number (If known) _____
Name

48. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

(10) Mosquito Commercial vacuums	\$0.00	Comparable sale	\$4,300.00
(1) Automatic Commercial Floor Scrubber	\$0.00	Comparable sale	\$203.00
(5) Mosquito - commercial vacuums	\$0.00	Comparable sale	\$3,640.00
1 Propane BU - propane tank	\$0.00	Comparable sale	\$480.00
(1) Electric B - machinery	\$0.00	Comparable sale	\$240.00
(3) Viper Fang - buffer machines to use for cleaning floors	\$0.00	Comparable sale	\$1,832.00

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$14,295.00

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

- No
 Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- No
 Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

- No. Go to Part 10.
 Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

- No. Go to Part 11.
 Yes Fill in the information below.

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- No. Go to Part 12.
 Yes Fill in the information below.

Debtor Southern Pacific Janitorial Group, Inc. Case number (if known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$24,000.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$500.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$37,600.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$5,000.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$3,000.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$14,295.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$84,395.00</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$84,395.00</u>

Fill in this information to identify the case:

Debtor name Southern Pacific Janitorial Group, Inc.

United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA

Case number (if known) _____

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- Yes. Fill in all of the information below.

Fill in this information to identify the case:

Debtor name Southern Pacific Janitorial Group, Inc.

United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA

Case number (if known) _____

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.

Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address Alberto Lopez 1900 Poco Way, Apt. 203 San Jose, CA 95116	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,248.00	\$1,248.00
	Date or dates debt was incurred October 2017	Basis for the claim: Non wage earner contracting employee receiving 1099		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address Almirante Perez 6060 Blythe Ave. Highland, CA 92346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,400.00	\$2,400.00
	Date or dates debt was incurred October 2017	Basis for the claim: Wage earner 50% owner of the Corporation and the President		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Southern Pacific Janitorial Group, Inc.** Case number (if known)

2.3	Priority creditor's name and mailing address Ana Pichinte 22242 S Garden Ave., Apt 42D Hayward, CA 94541	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address Anabel Martinez 580 Andrew Avenue San Jacinto, CA 92583	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$400.00	\$400.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address Ander Castillo 2415 Pine Ave., Apt 503 Long Beach, CA 90803	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,270.00	\$1,270.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address Antonio Angeles 8833 Mission Blvd., Apt. 27 Rosemead, CA 91770	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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Name

2.7	Priority creditor's name and mailing address Antonio Cabral 2219 Prone Street Pinole, CA 94564	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$550.00	\$550.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.8	Priority creditor's name and mailing address Antonio Flores 25203 Belle Porte Ave. #6 Harbor City, CA 90710	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.9	Priority creditor's name and mailing address Antonio Guzman 39609 Cholla Ct Murrieta, CA 92563	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.10	Priority creditor's name and mailing address Antonio Tacan 1550 W 17th St Los Angeles, CA 90006	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$840.00	\$840.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Southern Pacific Janitorial Group, Inc.** Case number (if known) _____

2.11	Priority creditor's name and mailing address Armando Martinez 869 Olive Ave South San Francisco, CA 94080	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,270.00	\$1,270.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.12	Priority creditor's name and mailing address Beatrice Escobedo 14954 Yucca Ave Fontana, CA 92335	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$315.00	\$315.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.13	Priority creditor's name and mailing address Benita Alvarado 393 Athol Street, Ste 8 San Bernardino, CA 92401	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$220.50	\$220.50
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.14	Priority creditor's name and mailing address Benita M Alvarado 18388 Hawthorne Ave. Bloomington, CA 92316	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$220.50	\$220.50
Date or dates debt was incurred October 2017		Basis for the claim: Wage earner		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Southern Pacific Janitorial Group, Inc. Case number (if known) _____

2.15	Priority creditor's name and mailing address Camila Rivera 627 San Juan Dr., #3 Sunnyvale, CA 94085	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$725.00	\$725.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.16	Priority creditor's name and mailing address Candice Enriquez 1715 Cochran St., Apt. L Simi Valley, CA 93065	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.17	Priority creditor's name and mailing address Carolina Estrada 359 E 51st Street Long Beach, CA 90805	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$100.00	\$100.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.18	Priority creditor's name and mailing address Clara Hernandez 1215 D. st. Apt E. 102 Corona, CA 92882	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$603.00	\$603.00
Date or dates debt was incurred October 2017		Basis for the claim: Wage Earner		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Southern Pacific Janitorial Group, Inc.** Case number (if known)

Name

2.19	Priority creditor's name and mailing address Claudia Figueroa 393 Athol Street, Ste 8 San Bernardino, CA 92401	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$265.00	\$265.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.20	Priority creditor's name and mailing address Claudia Garcia 2455 Pinion Springs Bakersfield, CA 93309	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$300.00	\$300.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.21	Priority creditor's name and mailing address Claudio Maya 2050 Buttonwood Str. Colton, CA 92324	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.22	Priority creditor's name and mailing address Daniel Caraza 14064 Gain St Pacoima, CA 91331	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Southern Pacific Janitorial Group, Inc.** Case number (if known) _____
Name

2.23	Priority creditor's name and mailing address David Garcia 13140 Princeton Dr Victorville, CA 92392	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.24	Priority creditor's name and mailing address Diana Nava 26525 Gading Rd., #12 Hayward, CA 94544	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$195.00	\$195.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.25	Priority creditor's name and mailing address Diego Lari 431 Patricia Avenue San Mateo, CA 94402	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$600.00	\$600.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.26	Priority creditor's name and mailing address Dominga Garcia 393 Athol St., Ste 8 San Bernardino, CA 92401	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$472.50	\$472.50
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.27	Priority creditor's name and mailing address Dominga Ruiz 393 Athol St., Ste 8 San Bernardino, CA 92401	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$300.00	\$300.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.28	Priority creditor's name and mailing address Edgardo Costaneda 32175 Pueblo Trl Cathedral City, CA 92234	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.29	Priority creditor's name and mailing address Edith Andrade 9410 Felipe Ave. Montclair, CA 91763	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$620.00	\$620.00
Date or dates debt was incurred October 2017		Basis for the claim: Wage Earner		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.30	Priority creditor's name and mailing address Edwin Hernandez 21339 Mackland Ave Hayward, CA 94541	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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Name

2.31	Priority creditor's name and mailing address Effrain Oliveres 1317 S Pacific Ave Santa Ana, CA 92704	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred		Basis for the claim:		
June 2017		Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.32	Priority creditor's name and mailing address Elba Alisia Guzman 1954 S Park Ave., Apt 1 Pomona, CA 91766	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred		Basis for the claim:		
October 2017		Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.33	Priority creditor's name and mailing address Elias Hernandez 12052 Llaguna St., Apt 3 Garden Grove, CA 92840	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred		Basis for the claim:		
October 2017		Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.34	Priority creditor's name and mailing address Elio Garcia 14654 Nord Hoss St, Apt 208 Panorama City, CA 91402	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred		Basis for the claim:		
October 2017		Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Southern Pacific Janitorial Group, Inc. Case number (if known) _____
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2.35	Priority creditor's name and mailing address Elizabeth Alvarez 26556 Chisholm Ct Hayward, CA 94544	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$550.00	\$550.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.36	Priority creditor's name and mailing address Elizabeth Mendez 485 B Street Hayward, CA 94541	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.37	Priority creditor's name and mailing address Elsy Noemi Martinez 16700 Mary Gold Ave., Apt G101 Fontana, CA 92335	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$350.00	\$350.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.38	Priority creditor's name and mailing address Erick Hernandez 39 Larkspor Avenue Daly City, CA 94015	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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Priority	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
2.39	<p>Esmeralda Acuna 41915 Acacia Ave Hemet, CA 92544</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$400.00	\$400.00
2.40	<p>Evelia Adame 29596 Dixon St., Apt 51 Hayward, CA 94544</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$1,970.00	\$1,970.00
2.41	<p>Evelia Moreno 26122 Baseline St, #14 Highland, CA 92346</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$200.00	\$200.00
2.42	<p>Fabian Elias 450 E 4th St., No. 141 Santa Ana, CA 92701</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$850.00	\$850.00

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2.43	Priority creditor's name and mailing address Felipe Villalta 17162 V Ceres Ave Fontana, CA 92335	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.44	Priority creditor's name and mailing address Flora Mateos 3434 Gray Str. San Bernardino, CA 92407	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$283.50	\$283.50
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.45	Priority creditor's name and mailing address Franchise Tax Board P.O. Box 942857 Sacramento, CA 94257-0511	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred 2015-2017		Basis for the claim: Precaution Debt		
Last 4 digits of account number 2298 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.46	Priority creditor's name and mailing address Francisco Terrones 9095 Alder Ave Fontana, CA 92335	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.47	Priority creditor's name and mailing address Fredi Arial Avila 3434 Gray Street San Bernardino, CA 92407	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.48	Priority creditor's name and mailing address Gabriel Perez 393 Athol St., Ste 8 San Bernardino, CA 92401	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$819.00	\$819.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.49	Priority creditor's name and mailing address Gabriela Rojas 1125 Madison Str San Bernardino, CA 92411	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.50	Priority creditor's name and mailing address Gasper Raymundo 1405 Marshall Street Redwood City, CA 94063	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,100.00	\$3,100.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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Priority	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
2.51	<p>Gerardo Morales 380 W Barbour, Apt. 143 Banning, CA 92220</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$1,400.00	\$1,400.00
2.52	<p>Gisela Ramos 3611 Nevin Ave Richmond, CA 94805</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$700.00	\$700.00
2.53	<p>Gloria Espino 265 S 44th Street San Bernardino, CA 92405</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$650.00	\$650.00
2.54	<p>Gloria Martinez 1595 Detrit Ave., #203 Concord, CA 94520</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$0.00	\$0.00

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2.55	Priority creditor's name and mailing address Graciela Salinas 185 13th Street, Apt. 4 Hayward, CA 94541	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.56	Priority creditor's name and mailing address Hector Alvarez 20920 Teton Rd Apple Valley, CA 92308	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$540.00	\$540.00
Date or dates debt was incurred October 2017		Basis for the claim: Wage Earner		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.57	Priority creditor's name and mailing address Henry Lagunas 1322 Bella Street San Bernardino, CA 92404	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.58	Priority creditor's name and mailing address Hermillo Cortes 617 W 127st Street San Bernardino, CA 92405	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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Case No.	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	Amount	Amount
2.59	<p>Hugo Duarte 617 W 17th Street San Bernardino, CA 92405</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,100.00	\$2,100.00
2.60	<p>Internal Revenue Service 300 N. Los Angeles Street Los Angeles, CA 90012</p> <p>Date or dates debt was incurred 2015 Year</p> <p>Last 4 digits of account number 2298 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Proposed penalty amount for 2015 Income Tax Returns.</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$25,480.00	\$25,480.00
2.61	<p>Javier Cruz Santiago 1898 Genevieve Street San Bernardino, CA 92405</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wage Earner</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$250.00	\$250.00
2.62	<p>Javier Gonzalez 2652 Del Rosa Ave., Apt 131 San Bernardino, CA 92404</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,430.00	\$2,430.00

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2.63	Priority creditor's name and mailing address Jesus Diaz 1334 N. Street, Apt. 14 San Bernardino, CA 92405	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.64	Priority creditor's name and mailing address Jesus E Aispuro Prado 1787 Porter Str. San Bernardino, CA 92407	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$550.00	\$550.00
Date or dates debt was incurred October 2017		Basis for the claim: Wage Earner		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.65	Priority creditor's name and mailing address Joanna Hernandez 1714 N. Arrowhead Ave Rialto, CA 92376	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.66	Priority creditor's name and mailing address Jorge A. Sipac 1144 E. Chevy chase Dr. Glendale, CA 91205	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$840.00	\$840.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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Case No.	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	Amount	Amount
2.67	<p>Priority creditor's name and mailing address</p> <p>Jorge Huerta 1209 79th ave Oakland, CA 94621</p> <p>Date or dates debt was incurred</p> <p>October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,010.00	\$2,010.00
2.68	<p>Priority creditor's name and mailing address</p> <p>Jose Cervantez 1606 Evergreen Str., Apt A Santa Ana, CA 92707</p> <p>Date or dates debt was incurred</p> <p>October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Non wage earner contracting employee receiving 1099 For precaution</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00	\$0.00
2.69	<p>Priority creditor's name and mailing address</p> <p>Juan Carlos Franco 15276 Hallmark Victorville, CA 92394</p> <p>Date or dates debt was incurred</p> <p>October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Non wage earner contracting employee receiving 1099 For precaution</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00	\$0.00
2.70	<p>Priority creditor's name and mailing address</p> <p>Juan Chavez 2113 W 11 Street Santa Ana, CA 92703</p> <p>Date or dates debt was incurred</p> <p>October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Non wage earner contracting employee receiving 1099 For precaution</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00	\$0.00

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Name

2.71	Priority creditor's name and mailing address Juan Ramon Parra Landero 22631 Tennoco Str. Moreno Valley, CA 92553	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$250.00	\$250.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.72	Priority creditor's name and mailing address Julio Garcia 2820 Nebraska Ave., Apt 3 South Gate, CA 90280	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.73	Priority creditor's name and mailing address Julio Hernandez 101 Street, Apt. 4 Richmond, CA 94801-4000	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.74	Priority creditor's name and mailing address Laura Diaz 28048 Marguerite Pky, Apt 48 Mission Viejo, CA 92692	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$346.50	\$346.50
Date or dates debt was incurred October 2017		Basis for the claim: Wage Earner		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.75	Priority creditor's name and mailing address Leobaldo Apolinar 214 N. Urtiz Way Anaheim, CA 92806	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	October 2017	Non wage earner contracting employee receiving 1099 For precaution		
	Last 4 digits of account number None	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.76	Priority creditor's name and mailing address Leticia Gonzalez 450 East 4th St., Apt 419 Santa Ana, CA 92701	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	October 2017	Non wage earner contracting employee receiving 1099 For precaution		
	Last 4 digits of account number None	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.77	Priority creditor's name and mailing address Lidia Trejo 44845 Las Palmas #5 Palm Desert, CA 92260	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	October 2017	Non wage earner contracting employee receiving 1099 For precaution		
	Last 4 digits of account number None	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.78	Priority creditor's name and mailing address Lourdes Adame 22584 Nevada Rd Hayward, CA 94541	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,430.00	\$1,430.00
	Date or dates debt was incurred	Basis for the claim:		
	October 2017	Non wage earner contracting employee receiving 1099		
	Last 4 digits of account number None	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.79	Priority creditor's name and mailing address Luis Arce 3093 June st. San Bernardino, CA 92407	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,200.00	\$1,200.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.80	Priority creditor's name and mailing address Luis Lozoya 485 B Street Hayward, CA 94545	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,250.00	\$1,250.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.81	Priority creditor's name and mailing address Marcela Ramirez c/o Sam Kim Verum Law Group, APC 841 Apollo Street, Ste 340 El Segundo, CA 90245	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim: Unpaid and Overtime wages, proposed class action law suit is filed with Superior Court of California, County of San Bernardino		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.82	Priority creditor's name and mailing address Maria De Jesus Moreno 31371 Los Rios San Juan Capistrano, CA 92675	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.83	Priority creditor's name and mailing address Maria Orozco 1434 47th Ave Oakland, CA 94601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred October 2017	Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.84	Priority creditor's name and mailing address Maria Prado 218 W Washington San Bernardino, CA 92411	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,400.00	\$1,400.00
	Date or dates debt was incurred October 2017	Basis for the claim: Non wage earner contracting employee receiving 1099		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.85	Priority creditor's name and mailing address Maria Rodriguez 16735 Sunset Dr Victorville, CA 92395	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred October 2017	Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.86	Priority creditor's name and mailing address MariaCesan Estrada 243 N. Meridian Ave., Spc 68 San Bernardino, CA 92410	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred October 2017	Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
	Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.87	Priority creditor's name and mailing address Mariela Martinez 2122 Main Str., #1 Santa Clara, CA 95050	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.88	Priority creditor's name and mailing address Martin Hernandez 1748 Paseo Laguna Seco, Apt 130 Livermore, CA 94550	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$500.00	\$500.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.89	Priority creditor's name and mailing address Martin Medina Allendelagua 47 Leighton Rd Ventura, CA 93001	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.90	Priority creditor's name and mailing address Martina Villalobos 2919 Street Danville, CA 94506	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$650.00	\$650.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.91	Priority creditor's name and mailing address Max Chinola 282 Zenith Str., Unit 7 Chula Vista, CA 91911	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred		Basis for the claim:		
October 2017		Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.92	Priority creditor's name and mailing address Mayra Medina 25185 Oaleppo Moreno Valley, CA 92553	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$920.00	\$920.00
Date or dates debt was incurred		Basis for the claim:		
October 2017		Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.93	Priority creditor's name and mailing address Miriam Valentin 10851 Palma Cista, Apt 5 Garden Grove, CA 92840	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred		Basis for the claim:		
October 2017		Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.94	Priority creditor's name and mailing address Mirian Garcia 6060 Blythe Ave. Highland, CA 92346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,000.00	\$2,000.00
Date or dates debt was incurred		Basis for the claim:		
October 2017		Wage earner 50% owner of the Corporation and the President		
Last 4 digits of account number None		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.95	Priority creditor's name and mailing address Mirian Moreno 101 St, Apt 14 Richmond, CA 94801	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.96	Priority creditor's name and mailing address Monica Montelongo 12661 Pierce Street, Apt. 203 Pacoima, CA 91331	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$150.00	\$150.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.97	Priority creditor's name and mailing address Nadia Padreza 36920 Elm St., #A Newark, CA 94560	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$290.00	\$290.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.98	Priority creditor's name and mailing address Norma Rios 21468 Kenney St Perris, CA 92570	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$672.00	\$672.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.99	Priority creditor's name and mailing address Ociel Ojeda 294 Templeton Ave Daly City, CA 94014	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.100	Priority creditor's name and mailing address Oscar Mendez 696 w 20th Street San Bernardino, CA 92407	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.101	Priority creditor's name and mailing address Oscar Perez 17220 Barbee St., Apt. A Fontana, CA 92335	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.102	Priority creditor's name and mailing address Pedro Carranza 14 Pacific Street Bakersfield, CA 93305	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$600.00	\$600.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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Case Number	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	Amount	Amount
2.103	<p>Pedro Hernandez 24827 Brodiaaea Ave Moreno Valley, CA 92553</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$378.00	\$378.00
2.104	<p>Rafael Reymundo 1405 Marshall Street Redwood City, CA 94063</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$730.00	\$730.00
2.105	<p>Ramon Parra 22631 Temco Str., Apt. 3 Garden Grove, CA 92840</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099 For precaution</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	Unknown	Unknown
2.106	<p>Raul Cervantes 37010 Bankside, Apt.11 Cathedral City, CA 92234</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$805.50	\$805.50

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Case Number	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	Amount	Amount
2.107	<p>Priority creditor's name and mailing address</p> <p>Roberto Lopez 15935 Serrano Apple Valley, CA 92307</p> <hr/> <p>Date or dates debt was incurred</p> <p>October 2017</p> <hr/> <p>Last 4 digits of account number None</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim:</p> <p>Non wage earner contracting employee receiving 1099</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$588.00	\$588.00
2.108	<p>Priority creditor's name and mailing address</p> <p>Rosa Claro 9059 Alder Ave Fontana, CA 92335</p> <hr/> <p>Date or dates debt was incurred</p> <p>October 2017</p> <hr/> <p>Last 4 digits of account number None</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim:</p> <p>Non wage earner contracting employee receiving 1099 For precaution</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$0.00	\$0.00
2.109	<p>Priority creditor's name and mailing address</p> <p>Rosa Martha Quintero 2500 Edwards Ave., Apt 1 South El Monte, CA 91733</p> <hr/> <p>Date or dates debt was incurred</p> <p>October 2017</p> <hr/> <p>Last 4 digits of account number None</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim:</p> <p>Non wage earner contracting employee receiving 1099</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$550.00	\$550.00
2.110	<p>Priority creditor's name and mailing address</p> <p>Rosalba Millan 12502 Harris Ave., Apt. B Lynwood, CA 90262</p> <hr/> <p>Date or dates debt was incurred</p> <p>October 2017</p> <hr/> <p>Last 4 digits of account number None</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <hr/> <p>Basis for the claim:</p> <p>Non wage earner contracting employee receiving 1099</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$425.00	\$425.00

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2.111	Priority creditor's name and mailing address Roxana Ruiz 2947 Remington Way San Jose, CA 95148	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$550.00	\$550.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.112	Priority creditor's name and mailing address Silvia Vazquez 1140 W 9th St, Apt. 2 San Bernardino, CA 92411	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$300.00	\$300.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.113	Priority creditor's name and mailing address Susana Ramirez Razo 101 St, Apt 3 Richmond, CA 94801	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$650.00	\$650.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.114	Priority creditor's name and mailing address Tito Marin 1340 Belle Street San Bernardino, CA 92404	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$800.00	\$800.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number <u>None</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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Priority	Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
2.115	<p>Vernica Gonzalez 1511 Newborough Dr. Sacramento, CA 95833</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,500.00	\$1,500.00
2.116	<p>Veronica Ibanez 33517 10th Street Union City, CA 94587</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$650.00	\$650.00
2.117	<p>Veronica V Coronado 16776 San Jacinto Ave., Apt. 32 Fontana, CA 92336</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wage Earner</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$367.50	\$367.50
2.118	<p>Victor Camacho 968 E. Olive Street San Bernardino, CA 92410</p> <p>Date or dates debt was incurred October 2017</p> <p>Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non wage earner contracting employee receiving 1099</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,100.00	\$1,100.00

Debtor **Southern Pacific Janitorial Group, Inc.** Case number (if known)

Name

2.119	Priority creditor's name and mailing address Victor Martinez 10816 Magnolia st. Bloomington, CA 92316	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$210.00	\$210.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.120	Priority creditor's name and mailing address Walter Ruiz 3674 Water Bary Ct., Apt 9 San Jose, CA 95117	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,250.00	\$1,250.00
Date or dates debt was incurred October 2017		Basis for the claim: Non wage earner contracting employee receiving 1099		
Last 4 digits of account number None Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address Atlas General Ins. Services, LLC 4365 Execution Drive, Ste 400 San Diego, CA 92121 Date(s) debt was incurred <u>4/2015 to 4/2016</u> Last 4 digits of account number <u>9400</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Workers Compensation Insurance Premium: 1. For Goods and Services Sold and Delivered 2. Account Stated 3. Open Boood Account 4. Breach of Contract	\$304,108.00	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

3.2	Nonpriority creditor's name and mailing address Chase P O Box 94014 Palatine, IL 60094-4014 Date(s) debt was incurred <u>August 2017</u> Last 4 digits of account number <u>0249</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Business Credit Card	\$936.59	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

3.3	Nonpriority creditor's name and mailing address Rancho Janitorial Supplies 416 North Ninth Street Modesto, CA 95350 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>5059</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Janitorial Supplies	\$12,591.78	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Southern Pacific Janitorial Group, Inc.** Case number (if known) _____
Name

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Anthony Choe Law Offices of Anthony Choe 3700 Wilshire Blvd., Ste 260 Los Angeles, CA 90010	Line <u>2.81</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	Calif.Labor & Workforce Development Attn: PAGA Administrator 1515 Clay Street, Ste 801 Oakland, CA 94612	Line <u>2.81</u> <input type="checkbox"/> Not listed. Explain _____	—
4.3	Natalia A Minassian Hatkoff & Minassian, A Law Corporat 18757 Burbank Blvd., Suite 100 Tarzana, CA 91356	Line <u>3.1</u> <input type="checkbox"/> Not listed. Explain _____	<u>6519</u>

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	Total of claim amounts
5a. Total claims from Part 1	\$ <u>80,899.50</u>
5b. Total claims from Part 2	\$ <u>317,636.37</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	\$ <u>398,535.87</u>

Fill in this information to identify the case:

Debtor name Southern Pacific Janitorial Group, Inc.

United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA

Case number (if known) _____

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

**Debtor is Lessee
Month to month rental agreement, which does not include electricity.
Monthly rent: \$875.00**

State the term remaining

List the contract number of any government contract _____

**Michal Kamran/ Office Landlord
13700 Alton Parkway
Irvine, CA 92618**

Fill in this information to identify the case:

Debtor name Southern Pacific Janitorial Group, Inc.

United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA

Case number (if known) _____

Check if this is an amended filing

**Official Form 206H
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

	Name	Mailing Address	Name	Check all schedules that apply:
2.1	_____	Street _____ _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	_____	Street _____ _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	_____	Street _____ _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	_____	Street _____ _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name Southern Pacific Janitorial Group, Inc.

United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA

Case number (if known) _____

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From 1/01/2017 to Filing Date

Operating a business
 Other _____

\$1,422,000.00

For prior year:
From 1/01/2016 to 12/31/2016

Operating a business
 Other _____

\$3,896,887.00

For year before that:
From 1/01/2015 to 12/31/2015

Operating a business
 Other _____

\$991,956.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed

Debtor

Southern Pacific Janitorial Group, Inc.

Case number (if known)

or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Marcela Ramirez vs Southern Pacific Janitorial Group, Inc., DOES 1-20 inclusive CIVDS1715508	Proposed Civil - Class Action	Superior Court of CA, County of San Bernardino 247 West 3rd Street San Bernardino, CA 92415-0210	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. Atlas General Insurance Services LLC vs Southern Pacific Janitorial Group, Inc. and DOES 1 through 50, inclusive CIVDS-1704093	Civil	Superior Court of California, County of San Bernardino 247 West 3rd Street San Bernardino, CA 92415	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

Debtor Southern Pacific Janitorial Group, Inc. Case number (if known) _____

None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Law Offices of Michael Jay Berger 9454 Wilshire Boulevard, 6th floor Beverly Hills, CA 90212	Attorney Fees	9/22/17 - \$10,000.00 Legal Fees 9/22/17 - \$1,717.00 Filing Fee 10/20/17 - \$10,000 Legal Fees	\$20,000.00
Email or website address michael.berger@bankruptcypower.com			
Who made the payment, if not debtor? Gifted by family members of Debtor's CEO, Almirante Perez			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device. Do not include transfers already listed on this statement.

None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

Debtor

Southern Pacific Janitorial Group, Inc.

Case number (if known)

None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy From-To
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Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:
 - diagnosing or treating injury, deformity, or disease, or
 - providing any surgical, psychiatric, drug treatment, or obstetric care?

- No. Go to Part 9.
- Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	---	---

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- No.
- Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- No. Go to Part 10.
- Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?
 Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

Debtor Southern Pacific Janitorial Group, Inc. Case number (if known) _____

None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- No.
- Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- No.
- Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- No.
- Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business

Debtor Southern Pacific Janitorial Group, Inc. Case number (if known) _____

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
		Dates business existed

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address	Date of service From-To
26a.1. Golden Eagle Consulting Svcs Inc. 325 W Hospitality Ln, Ste 209 San Bernardino, CA 92408	2015 to current

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

Name and address	If any books of account and records are unavailable, explain why

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

Name and address

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No

Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

Debtor Southern Pacific Janitorial Group, Inc. Case number (if known) _____

- No
- Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
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31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- No
- Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
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32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- No
- Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 26, 2017

/s/ Almirante Perez, Preseident
Signature of individual signing on behalf of the debtor

Almirante Perez, Preseident
Printed name

Position or relationship to debtor _____

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- No
- Yes

United States Bankruptcy Court Central District of California

In re Southern Pacific Janitorial Group, Inc. Debtor(s)

Case No. Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

Table with 2 columns: Description of compensation and Amount. Rows include: For legal services, I have agreed to accept (\$ 20,000.00), Prior to the filing of this statement I have received (\$ 20,000.00), Balance Due (\$ 0.00).

2. The source of the compensation paid to me was:

Debtor (checked) Other (specify):

3. The source of compensation to be paid to me is:

Debtor Other (specify): \$10,000 gifted by family members of Debtor's CEO, Almirante Perez

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtor in any dischargeability actions, judicial lien avoidances, or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

October 26, 2017 Date

/s/ Michael Jay Berger Michael Jay Berger Signature of Attorney Law Offices of Michael Jay Berger 9454 Wilshire Boulevard, 6th floor Beverly Hills, CA 90212 Name of law firm

Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address Michael Jay Berger 9454 Wilshire Boulevard, 6th floor Beverly Hills, CA 90212 California State Bar Number: 100291 <input type="checkbox"/> Debtor(s) appearing without an attorney <input checked="" type="checkbox"/> Attorney for Debtor	FOR COURT USE ONLY
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**UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA**

In re: <p style="text-align: center;">Southern Pacific Janitorial Group, Inc.</p> <p style="text-align: right;">Debtor(s).</p>	CASE NO.: CHAPTER: 11 <p style="text-align: center;">VERIFICATION OF MASTER MAILING LIST OF CREDITORS</p> <p style="text-align: center;">[LBR 1007-1(a)]</p>
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Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicable, certifies under penalty of perjury that the master mailing list of creditors filed in this bankruptcy case, consisting of 17 sheet(s) is complete, correct, and consistent with the Debtor's schedules and I/we assume all responsibility for errors and omissions.

Date: October 26, 2017

/s/ Almirante Perez, Preseident
Signature of Debtor 1

Date: _____

Signature of Debtor 2 (joint debtor) (if applicable)

Date: October 26, 2017

/s/ Michael Jay Berger
Signature of Attorney for Debtor (if applicable)

This form is optional. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

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UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA	
In re: Southern Pacific Janitorial Group, Inc. Debtor(s), Plaintiff(s), Defendant(s).	CASE NO.: ADVERSARY NO.: CHAPTER: 11 CORPORATE OWNERSHIP STATEMENT PURSUANT TO FRBP 1007(a)(1) and 7007.1, and LBR 1007-4 [No hearing]

Pursuant to FRBP 1007(a)(1) and 7007.1, and LBR 1007-4, any corporation, other than a governmental unit, that is a debtor in a voluntary case or a party to an adversary proceeding or a contested matter shall file this Statement identifying all its parent corporations and listing any publicly held company, other than a governmental unit, that directly or indirectly own 10% or more of any class of the corporation's equity interest, or state that there are no entities to report. This Corporate Ownership Statement must be filed with the initial pleading filed by a corporate entity in a case or adversary proceeding. A supplemental statement must promptly be filed upon any change in circumstances that renders this Corporate Ownership Statement inaccurate.

I, **Michael Jay Berger**, the undersigned in the above-captioned case, hereby declare
 (Print Name of Attorney or Declarant)
 under penalty of perjury under the laws of the United States of America that the following is true and correct:

[Check the appropriate boxes and, if applicable, provide the required information.]

1. I have personal knowledge of the matters set forth in this Statement because:
- I am the president or other officer or an authorized agent of the Debtor corporation
 - I am a party to an adversary proceeding
 - I am a party to a contested matter
 - I am the attorney for the Debtor corporation
- 2.a. The following entities, other than the debtor or a governmental unit, directly or indirectly own 10% or more of any class of the corporation's(s') equity interests:
[For additional names, attach an addendum to this form.]
- b. There are no entities that directly or indirectly own 10% or more of any class of the corporation's equity interest.

Date

By: /s/ Michael Jay Berger
Signature of Debtor, or attorney for Debtor

Name: Michael Jay Berger
Printed name of Debtor, or attorney for Debtor